## **HOUSE BILL 2118**

## By Kumar

AN ACT to amend Tennessee Code Annotated, Title 4, Chapter 29 and Title 71, Chapter 2, relative to palliative care.

## BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Section 4-29-244(a), is amended by adding the following as a new subdivision:

() State palliative care and quality of life council, created by § 71-2-115; SECTION 2. Tennessee Code Annotated, Title 71, Chapter 2, Part 1, is amended by adding the following as a new section:

## 71-2-115.

- (a) As used in this section:
- (1) "Commission" means the Tennessee commission on aging and disability;
  - (2) "Council" means the state palliative care and quality of life council;
- (3) "Executive director" shall mean the executive director of the Tennessee commission on aging and disability; and
- (4) "Palliative care" means an approach that improves the quality of life of patients and their families facing the problems associated with chronic life-threatening illness, through the prevention and relief of suffering by means of early identification and assessment and treatment of pain and other problems, physical, psychosocial, and spiritual. Palliative care includes, but is not limited to:
  - (A) Discussions involving a patient's goals for treatment;

- (B) Discussions involving treatment options that are appropriate to the patient, including, where appropriate, hospice care; and
  - (C) Comprehensive pain and symptom management.
- (b) The state palliative care and quality of life advisory council is established.
- (c) The purpose of the council is to continually assess the current status of palliative care in the state and to review the barriers that exist that prevent such care from being obtained and utilized by the people who could benefit from such care. The council shall provide recommendations to the governor and to the general assembly on issues related to its work.
- (d) The council membership shall be appointed by the executive director, after consulting with Tennessee Hospice Association, Tennessee Hospital Association, Tennessee Medical Association, Tennessee Nursing Association, Tennessee Health Care Association, and the Tennessee Chapter of American Cancer Society, and shall include interdisciplinary palliative care medical, nursing, social work, pharmacy, and spiritual professional expertise; patient and family caregiver advocate representation; and any other relevant appointees the executive director determines appropriate. The advisory council shall consist of no more than ten (10) members. The executive director shall consider the racial, gender, geographic, urban/rural, and economic diversity of the state when appointing members. Membership shall specifically include health professionals having palliative care work experience or expertise in palliative care delivery models in a variety of inpatient, outpatient, and community settings such as acute care, long-term care, and hospice and with a variety of populations, including pediatric, youth, and adult. At least one (1) council member shall be a board-certified hospice and palliative medicine physician and at least one (1) council member shall be a licensed certified registered nurse practitioner with expertise in palliative care. Council members shall be appointed for a term of three (3) years. The members shall elect a

chair and vice chair whose duties shall be established by the council. The council shall fix a time and place for regular meetings and shall meet no less than twice yearly.

- (e) Council members shall receive no compensation for their services.
- (f) The council shall consult with and advise the executive director on matters related to the establishment, maintenance, and operation of palliative care initiatives in this state.
  - (g) The commission shall provide administrative support to the council.
- (h) By January 15th of 2020, and by January 15 of each subsequent year, the advisory council shall submit a report to the general assembly that addresses barriers to palliative care access, analyzes service utilization data, and provides recommendations and best practices to address gaps in service.

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring

it.

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